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# STATEMENT OF WORK

**Anomalous Health Incident (AHI) and Occupational Health  
Support Staff  
January 2023**

**Statement of Work (SOW)**

Anomalous Health Incident (AHI) Lead Case Managers

Anomalous Health Incident (AHI) Case Managers

Physician Assistants (PA)

Registered Nurses (RN)

Medical Technicians

Certified Industrial Hygienists (CIH)

Psychologists

Epidemiologists

Physicians (MD or DO)

*January 2023*

**GENERAL INFORMATION**

This is a non-personal services fee for service, Labor Hour contract to provide 26 Anomalous Health Incident (AHI) and Occupational Health support staff on an as needed basis. Two contractors must be a credentialed Physician Assistants (PA). Two contractors must be a credentialed Registered Nurses (RN). Two contractors must be a Certified Industrial Hygienists (CIH). Two contractors must be credentialed Psychologists. Two contractors must be credentialed Epidemiologists. Two contractors must be credentialed Physicians (MD or DO). The Government also requires two Medical Technicians, two AHI Lead Case Managers, and ten AHI Case Managers. CONUS and OCONUS locations will be required for these contract positions. The Government shall not exercise any supervision or control over the service providers performing the services herein. Such service providers shall be accountable solely to the Contractor who, in turn is responsible to the Government.

1. Title of Project: Anomalous Health Incident (AHI) and Occupational Health Support Staff
2. Background: DIA requires specific expertise in identifying safety and health issues to ensure safe and healthful working conditions are maintained throughout the DIA enterprise. The safety and health functions require critical technical support to ensure that health and safety is maintained throughout DIA establishments occupied by DIA employees. The 26 Anomalous Health Incident (AHI) and Occupational Health Support Staff will ensure that DIA employees are working in a safe and healthy working environment.

3. Objectives: The objective of this contract is to obtain a total of 24 AHI and Occupational Health support staff: two AHI Lead Case Managers, ten AHI Case Managers, two Physician Assistants, two Registered Nurses, two Certified Industrial Hygienists, two Psychologists, two Epidemiologists, two Physicians and two Medical Technicians. The contractors of this contract will be working in either a CONUS or OCONUS location depending on mission need.

4. Scope: The vendor will provide the services of 26 AHI support staff. Two contractors must be a credentialed Physician Assistants (PA). Two contractors must be a credentialed Registered Nurses (RN). Two contractors must be Certified Industrial Hygienists (CIH). Two contractors must be credentialed Psychologists. Two contractors must be credentialed Epidemiologists. Two contractors must be credentialed Physicians (MD or DO). The vendor will also need to provide two Medical Technicians, two AHI Lead Case Managers, and ten AHI Case Managers. Due to the nature of occupations listed, it is imperative that medical and employee information is protected and all guidelines, regulations, and standard operating procedures (SOP's) are strictly followed.

5. Tasks: The description of task requirements for this contract includes:

**Two Certified Industrial Hygienists (One CONUS and One OCONUS)**

a. Provide technical expertise and advice to the agency and contractor personnel on a broad range of industrial hygiene matters, including but not limited to occupational health issues relating to Chemical, Biological, Radiological and Nuclear (CBRN) detection and protection.

b. Use provided indoor air quality (IAQ) testing equipment to monitor and test air quality in DIA facilities.

c. Test IAQ equipment annually as prescribed by manufacture recommendations.

d. Conduct Hazard Inspections – Conduct comprehensive Safety and Health Inspections in accordance with (IAW) the requirements outlined in 29 CFR 1910, 1926, 1960, DoDI 6055.1, the National Fire Protection Association (NFPA) LSC 101, and other publications as applicable.

1. Inspect each work site, building, module, room, office and work space, mechanical area within primary DIA NCR facilities to identify hazards, safety risks causing mission degradation, and non-compliance with standards.
2. Conduct complex research using technical testing and monitoring equipment along with publications to determine air quality. The CIH will coordinate with related occupational health specialists to develop technical bulletins, instructions, regulations and sections of field manuals for the agency personnel. The CIHs have the discretion

to use checklists using research results, note pads, or other documentation means (electronic only when approved); so, they can document findings during inspections. Testing equipment will also be used to collect information. The CIHs will interview 10-20 percent of occupants who are present to verify required safety training has been received, personal protective equipment has been issued as appropriate, and evacuation procedures are well known.

3. Review and analyze complex data collected to predict the probable effects of exposures on the health and well-being of workers, and recommends controls and preventive measures. Prepares response management for a variety of exposures including chemical, physical, and biological stresses.

4. Research and Analysis - The PSIs will formally report on findings that were debriefed at the end of the inspection process. The PSIs will research and analyze each finding to ensure validity of non-compliance, appropriate risk assessment, and good management practices. During this process, each finding will be noted with the appropriate reference to include its title. All risk assessment processes will be IAW DoDI 6055.1.

5. To complete the ongoing inspection process, the PSI's will brief each 3 - letter office chief or their designee with other appropriate supervisors, Directorate Safety Representative (DSR), and Collateral Duty Safety Representative (CDSR) on the reportable findings (positive and negative). For tenant agencies, the PSIs will out brief an on-site management official. Copies of PSIs' inspection notes will be provided during this exit briefing when requested.

6. Formal Documentation of Written Findings – After the completion of the formal inspection, the PSIs will have five business days to input the data into the Safety Data Base data base to record findings. Information gathered on inspections will be entered into all data fields. If data has not been collected for a specific field, the PSIs will acquire it or get approval from the DIA safety Office to proceed without it. The PSIs will work with the Safety Office Administrative Technician to maintain updated baseline information in the module.

e. Provide Corrective Actions to Directorates and Special Offices – When all information is in the Safety Data Base, the PSIs will have three business days to submit the completed organizational report from the report section of Safety Data Base to provide to the DIA Safety Office. The PSIs will draft a cover letter to include the process that the organization should follow to ensure hazard abatement and corrective actions take place. This will also assist in designating a date to conduct a follow-up inspection for compliance assurance. The PSIs will assist the Safety Office to task the appropriate organization in the automated DIA tasking system to monitor their inspection process. The PSIs will recommend to the Safety Office, a reasonable suspense based on the severity of hazard/risks noted IAW DoD Instructions.

f. Provide Corrective Actions to Tenant Agencies – After all information is entered into the Safety Data Base, the PSI's will have three business day to submit the completed organizational

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report from the reports section of Safety Data Base to the Safety Office. The PSIs will draft a cover letter to include the processes the organization should follow to ensure hazard abatement/corrective actions are accomplished. The PSIs will ensure that delivery of the report is received by the tenant on-site management official for action. A copy of the report will be sent hard- or soft-copy to the tenant organization main safety office.

g. Assist with Implementing Corrective Actions – The PSIs will respond to requests for assistance as they relate to the safety inspection process. Response is not required to be immediate, but will be planned around formal inspection schedules and work assignments.

h. Follow-up Inspections – Follow-up inspections will be coordinated with organizations similar to the initial inspection process. The PSIs will conduct follow-up inspections within 45-60 days after the initial inspection and after the organization requests closure of the tasker. The PSIs will revisit each area for compliance assurance to verify that corrective action has occurred and debrief the organization when the follow-up is complete. Within five days of completion of the follow-up inspection, the PSIs will validate all corrective actions in Safety Data Base and draft an inspection/corrective action assessment memorandum for the DIA Safety Office to forward to the Directorate or Special Office.

i. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating procedures (SOP's).

j. Other tasks as assigned by the DIA Safety Office Branch Chief within the related field as they relate to the above work requirements, new regulatory requirements, or overall safety of DIA personnel and facilities should be expected. Other tasks as assigned are: Conducting Industrial Hygiene Safety training. Topics might include: Hearing Conservation, Chemical Hygiene, Respirators, Radiation, Noise Reduction, and Ergonomics. Provide Ergonomic Consultation for the Office of Human Resources (OHR).

Requirements: A bachelor's or graduate/higher level degree in industrial hygiene, occupational health sciences, occupational and environmental health, toxicology, safety sciences, or related science. Contractor must have Certification from the American Board of Industrial Hygiene (ABIH). At least two years as a Certified Industrial Hygienist is required.

**Two Credentialed Physician Assistants (One CONUS and One OCONUS)**

a. Supports intelligence community missions through the collection of Medical Intelligence (MEDINT) used to inform DIA leadership on health-related impacts to DIA intelligence production and operations.

b. Serves as a clinical advisor to the Surgeon General, Mission Services Directorate. Assists and enables Executive Leadership to make critical employee safety and force health protection decisions that balance clinical risk against operational intelligence requirements. Critical to the



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analysis and development of strategic planning and direction impacting the agency's combat support capabilities.

c. Serves as lead clinician for conducting clinical assessments and medical response to Anomalous Health Incidents (AHI) affecting intelligence operations in CONUS and OCONUS. Responsible for all operational functions of the AHI Program (e.g., policy implementation, ops tempo, procedures, workforce response, workflows, analytical deliverables). Assists Surgeon General in medical evacuation of intelligence assets from sensitive missions in austere locations. Leverages MEDINT to ensure force health protection and medical readiness of intelligence assets to operate worldwide.

d. Represents the Surgeon General's Office at Defense Health Agency (DHA), DoD, ODNI, and other Intelligence Community meetings relating to the AHI program and other medical readiness forums impacting intelligence operations, as required.

e. Perform physical examinations as pertinent to the medical clearance of adult population. Make independent decisions regarding overseas medical clearances.

1. Obtain pertinent medical and psycho-social history, past medical history, social history and review of body systems. Collect and record medical history and conduct general and specific physical examinations as it pertains to an adult population and relates to medical clearances.

2. Order laboratory and ancillary tests as appropriate for the medical clearance process.

3. Differentiate between normal and abnormal (including variations of normal) information obtained from history, physical exam, and ancillary testing.

4. Preliminary interpretation of diagnostic tests with consultation as necessary (such as lab studies, EKG, etc.)

5. Develop determination of medical clearance from data obtained from history, physical, laboratory and x-ray studies.

6. Use all available information to make determination of medical clearance. Consult supervisory physician as needed for medical clearance.

7. Prescribe anti-malarial medications as indicated for foreign travel location.

Recommend appropriate vaccines based off of past immunization records and travel location.

8. Initiate appropriate management for emergency situations until physician is available.

f. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating procedures (SOP's).

g. Contractors will be required to sign a statement (Condition of Employment) consenting to seasonal influenza vaccinations or must provide a recognized exemption. Immunization screening is required. Hepatitis B immunization is required for all positions with direct patient contact. Applicants may be required to show proof of other immunizations depending on the type of position. Must be able to obtain and maintain current Basic Life Support (BLS) certification through American Red Cross. Advanced certification (e.g., ALS) does not

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supersede BLS. Applicants must be able to fulfill credentialing requirements and obtain and maintain appropriate/relevant clinical privileges.

h. Additional duties may be assigned by the Primary Supervisor Physician, appropriate Chief of Service or Chief of Staff, which may include provisions for special training to assure proficiency.

Requirements: Graduation from a physician assistant educational program, accredited by the Accreditation Review Committee on Education for the Physician Assistant (ARC-PA) or its predecessors, at a college, university, or educational institution that is accredited by an accrediting body or organization recognized by the U.S. Department of Education at the time the degree was obtained. Successful completion of the National Commission on Certification of Physician Assistants (NCCPA) examination; must maintain status as a certified physician assistant, including completion of all requirements for Continuing Medical Education (CME) and re-certification. Contractors must possess a current, active, full, and unrestricted license or registration as a Physician Assistant from a State, the District of Columbia, the Commonwealth of Puerto Rico, or a territory of the United States. A minimum of 2 full years of work experience as a certified physician assistant which includes performing medical examinations; diagnosing conditions; and ordering or interpreting diagnostic testing. Experience in occupational medicine, travel medicine, and neurology is highly desired.

**Two Credentialed Registered Nurses (One CONUS and One OCONUS)**

- a. Supports intelligence community missions through the collection of Medical Intelligence (MEDINT) used to inform DIA leadership on health-related impacts to DIA intelligence production and operations.
- b. Supports the provider clinical advisor to the Surgeon General, Mission Services Directorate.
- c. Assists the provider in reviewing medical intelligence data and preparing force health protection recommendations for the Surgeon General to inform decisions impacting intelligence operations.
- d. Assists in the analysis and development of strategic planning and direction impacting the agency's combat support capabilities.
- e. Supports clinicians for conducting clinical assessments and medical response to Anomalous Health Incidents (AHI) affecting intelligence operations in CONUS and OCONUS. Key enabler to the operational functions of the AHI Program (e.g., policy implementation, ops tempo, procedures, workforce response, workflows, analytical deliverables).

f. Assists Surgeon General in medical evacuation of intelligence assets from sensitive missions in austere locations. Leverages MEDINT to ensure force health protection and medical readiness of intelligence assets to operate worldwide.

g. Represents the Surgeon General's Office at Defense Health Agency (DHA), DoD, ODNI, and other Intelligence Community meetings relating to the AHI program and other medical readiness forums impacting intelligence operations, as required.

h. Coordinates medical services as related to travel health requirements such as physical examinations and administrative medical screening. Implements nursing and provider's orders in a timely and accurate manner for employees with nursing care needs.

1. Performs vital signs, draws specimens for pertinent travel, conducts lab work, and coordinates with lab if processed by an outside provider, EKG's, vision screening, audiometric screening, reviews travel medicine screening forms, and alerts employee of necessary changes.
2. Documents, enters, and retrieves written and electronic medical and laboratory patient data ensuring information is comprehensive, detailed accurate, and compliant to applicable guidelines.
3. Coordinates with the safety and public health offices to facilitate a comprehensive travel medicine and immunization program.
4. Screens and reviews immunization records to select required immunizations, correct dosages, and administers oral, intradermal, subcutaneous, intramuscular immunizations as indicated for medical clearance.
5. Consults with other health care professionals and provides supervisory training and new employees' orientation sessions.
6. Secures and maintains all employee travel medicine records and records database.
7. Implements an ongoing educational plan to support own professional development.
8. Assists Provider with various examinations

i. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating procedures (SOP's).

j. Contractors will be required to sign a statement (Condition of Employment) consenting to seasonal influenza vaccinations or must provide a recognized exemption. Immunization screening is required. Hepatitis B immunization is required for all positions with direct patient contact. Applicants may be required to show proof of other immunizations depending on the type of position. Must be able to obtain and maintain current Basic Life Support (BLS) certification through American Red Cross. Advanced certification (e.g., ALS) does not supersede BLS. Applicants must be able to fulfill credentialing requirements and obtain and maintain appropriate/relevant clinical privileges.



k. Additional duties may be assigned by the Primary Supervisor Physician, appropriate Chief of Service or Chief of Staff, which may include provisions for special training to assure proficiency.

Experience: Graduate of a school of professional nursing approved by the appropriate State-accrediting agency and accredited by one of the following accrediting bodies at the time the program was completed by the applicant: The Accreditation Commission for Education in Nursing (ACEN) or The Commission on Collegiate Nursing Education (CCNE). In cases of graduates of foreign schools of professional nursing, an official certification from the Commission on Graduates of Foreign Nursing Schools is required. Current, full, active, and unrestricted registration as a graduate professional nurse in a State, Territory or Commonwealth (i.e., Puerto Rico) of the United States, or the District of Columbia. Two or more full years of professional experience which includes managing travel medicine services or other administrative nursing functions; coordinating with health care providers to resolve problems; and providing training courses on travel medicine, blood borne pathogen training, immunization training, and any other required annual training.

**Two Medical Technicians (One CONUS and One OCONUS)**

- a. Supports intelligence community missions through the collection of Medical Intelligence (MEDINT) used to inform DIA leadership on health-related impacts to DIA intelligence production and operations.
- b. Supports the physician/Physician Assistant (PA) clinical advisor to the Surgeon General, Mission Services Directorate.
- c. Assists the clinical staff in reviewing medical intelligence data and preparing force health protection recommendations for the Surgeon General to inform decisions impacting intelligence operations.
- d. Provides technical expertise to enable medical planning to support worldwide intelligence operations.
- e. Coordinates medical logistics requirements and resources to support intelligence operations in austere conditions.
- f. Perform moderately difficult and complex laboratory examinations and procedures.
  - 1. Manage patient results status by verifying and certifying results.
  - 2. Set up and calibrate various analyzers and run quality control samples on all instruments.
  - 3. Perform automated complete blood counts.
  - 4. Perform a variety of microscopic, macroscopic and chemical analyses in Urinalysis.

g. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating procedures (SOP's).

Experience: One year of specialized experience which includes working in a clinical laboratory performing the full range of procedures such as specimen processing, specimen shipping, chemistry, urinalysis, hematology, serology, phlebotomy, immunohematology and/or bacteriology. Education in a field directly related to the work of the position, such as medical technology, chemistry, or biology.

### **Two AHI Lead Case Managers (One CONUS and One OCONUS)**

a. Performs lead analysis of Anomalous Health Incident (AHI i.e. Havana syndrome) threats from multiple sources and disciplines across the agency and Intelligence Community. Places intelligence information in context and draw insights about possible implication.

b. Responds to Requests for Information (RFI), and submits intelligence collection to national assets in support of planning and operations.

c. Provides intelligence analysis and support to Agency planning activities and time sensitive operations.

d. Responsible for acquiring and demonstrating patient case management expertise and knowledge of DoD and federal health care programs to improve the quality of patient care, the use of resources, and to facilitate compliance with internal and external requirements and standards; acquiring and demonstrating strength in the areas of interpersonal relations, critical thinking, problem solving and conflict resolution; collaborating with other case managers, other treatment teams, and other clinical and administrative staff as needed to ensure patient care needs are met.

1. Obtain and maintain appropriate Privacy Act and HIPAA training/certificates
2. Maintain proper storage and safeguarding of case information. Capture and maintain case data and conduct data analytics for relevant reports.
3. Provide guidance and recommendations to supervisors regarding AHI case management.
4. Provide regular updates on the status of cases and any other issues requiring leadership decision-making.
5. Conduct Medical Interviews.
6. Coordinate with and conduct handoff of affected individual with OCI for debriefing.
7. Draft and coordinate Treatment Referrals and Secretarial Designations as needed and appropriate.
8. Communicate and obtain proper medical information release authorization as needed.
9. Conduct follow up interviews with Affected Individuals to ensure parties are receiving proper care. Conduct post-treatment surveys.
10. Prepare relevant reports and respond to RFIs in a timely manner.

f. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating procedures (SOP's).

Experience: Must have a Bachelor's degree and/or 3+ years of experience in medical administration.

**Ten AHI Case Managers (Five CONUS and Five OCONUS)**

a. Performs analysis of Anomalous Health Incident (AHI i.e. Havana syndrome) threats from multiple sources and disciplines across the agency and Intelligence Community. Places intelligence information in context and draw insights about possible implication.

b. Responds to Requests for Information (RFI), and submits intelligence collection to national assets in support of planning and operations.

c. Provides intelligence analysis and support to Agency planning activities and time sensitive operations.

d. Responsible for acquiring and demonstrating patient case management expertise and knowledge of DoD and federal health care programs to improve the quality of patient care, the use of resources, and to facilitate compliance with internal and external requirements and standards; acquiring and demonstrating strength in the areas of interpersonal relations, critical thinking, problem solving and conflict resolution; collaborating with other case managers, other treatment teams, and other clinical and administrative staff as needed to ensure patient care needs are met.

1. Obtain and maintain appropriate Privacy Act and HIPAA training/certificates
2. Maintain proper storage and safeguarding of case information. Capture and maintain case data and conduct data analytics for relevant reports.
3. Provide guidance and recommendations to supervisors regarding AHI case management.
4. Provide regular updates on the status of cases and any other issues requiring leadership decision-making.
5. Conduct Medical Interviews.
6. Coordinate with and conduct handoff of affected individual with OCI for debriefing.
7. Draft and coordinate Treatment Referrals and Secretarial Designations as needed and appropriate.
8. Communicate and obtain proper medical information release authorization as needed.
9. Conduct follow up interviews with Affected Individuals to ensure parties are receiving proper care. Conduct post-treatment surveys.
10. Prepare relevant reports and respond to RFIs in a timely manner.

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e. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating practices (SOP's).

Experience: Must have an Associate's degree in medical administration and/or 1 + year administrative experience in a medical setting.

**Two Epidemiologists (One CONUS and One OCONUS)**

- a. Serve as the recognized expert in epidemiology for the agency with responsibility for developing policy and objectives, appraising programs, and initiating requirements for epidemiological studies
- b. Design, plan and initiate epidemiologic studies, surveys, and investigations
- c. Provide epidemiological advice and/or assistance in the resolution of technical problems and/or issues that include significant barriers to program or project delivery
- d. Define specific injury problems to be studied, conducts background research, and reviews background data. Monitor and document injuries, diseases, and other related health trends, rates, and impacts, reporting findings as required. Evaluate injury and disease preventive interventions determining efficacies. Recommend injury and disease prevention and other health preventive measures.
- e. Assist with strategic planning to mitigate injuries and other health factors affecting injury risk.
- f. Identify and analyze public health issues and their impact on public policies or scientific studies or surveys.
- g. Prepare and/or present summaries for a variety of purposes, monitor internal review board clearances, design questionnaires and other data collection instruments. Provide advice and assistance in the development and implementation of procedures, methods and strategies for obtaining and using scientific data which describe the prevalence of major health risks in an area, or the results of a scientific project or study. Collaborate with analysts and statisticians to develop joint analyses and publications. Participate in the syntheses of social science and epidemiologic data to be applied toward designing effective prevention programs and practice guidelines.
- h. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating practices (SOP's).

Experience: Bachelor's or graduate/higher level degree: major study in an academic field related to the medical field, health sciences or allied sciences appropriate to the work of the position. This degree must be from an educational program from an accrediting body recognized by the

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U.S. Department of Education at the time the degree was obtained. At least 1 year of experience developing public health outbreak or emergency preparedness plans, appraising public health programs and initiating requirements for epidemiological investigations and disease prevention activities. At least 2 years of experience performing epidemiological surveillance, investigations and recommendations for injury, disease prevention, and other health preventive measures; (2) Analyzing large datasets related to military survey data and military medical surveillance data; (3) Working independently with biostatistical software (SAS, SPSS). experience establishing, modifying and developing scientific methods and practices to evaluates epidemiological studies related to public health.

### **Two Credentialed Psychologists (One CONUS and One OCONUS)**

- a. Complete file reviews of Agency applicants' and contractors' background and testing materials, conduct structured clinical interviews of Agency applicants and contractors, and provide written reports of findings based on these interviews. This task includes the clinical evaluation of Agency police officer and special security assignment candidates, which will focus on an assessment of the candidate's potential for violence, anger management, capacity to perform duties that require use of a weapon, and the candidate's ability to exercise good judgment when making lethal decisions. The length of the interview should be no less than 45 minutes. The Contractor shall complete all documentation within three business days of conducting the evaluation. The content of the interviews and of the written reports will be determined by Chief, Psychological Assessments, OSG.
- b. Complete pre-deployment psychological and neuropsychological exams of Agency employees selected for deployment to assess employee readiness and ensure they are fit for deployment based on CCMD regulations. The Contractor will also complete post-deployment psychological exams for returning personnel to address variables that could interfere with a successful return to work. The Contractor shall conduct structured clinical interviews and provide written reports of findings based on these interviews. The length of the interview should be no less than 45 minutes. The Contractor shall complete all documentation within three business days of conducting the evaluation. The content of the interviews and of the written reports will be determined by Chief, Psychological Assessments, OSG.
- c. Support all tasks necessary to ensure the processing of applicant and other processes in OSG is timely and complete. These include: clinical review and triage and assessment of applicants and employees or OSG-related materials to expedite assessment and evaluation processes.
- d. Receive orientation/training and attend meetings regarding the nuances of the specialized applicant process to ensure standardization as well as an understanding of the interviews and components required by OSG. In addition, the contractor may be invited to attend division meetings and to participate in ad hoc program evaluations related to the applicant processing policies and procedures to ensure that work is meeting the quality and standards required by OSG.



e. The Contractor may need to provide additional support to address a continuing shortfall in psychological treatment for individuals and groups and counseling in traumatic events.

f. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating practices (SOP's).

**Experience:** Have a doctoral degree in psychology from a graduate program in psychology accredited by the American Psychological Association (APA), the Psychological Clinical Science Accreditation System (PCSAS), or the Canadian Psychological Association (CPA) at the time the program was completed. Must have at least two years of experience performing psychological assessments and exams.

**Licensure.** Hold a full, current, and unrestricted license to practice psychology at the doctoral level in a State, Territory, or Commonwealth of the United States, or the District of Columbia.

**Board Certification.** Must be board certified by the American Board of Professional Psychology in a specialty area that is consistent with the assignment for which the applicant is to be employed.

#### **Two Credentialed Physicians (One CONUS and One OCONUS)**

a. Leads intelligence community missions through the collection of Medical Intelligence (MEDINT) used to inform DIA leadership on health-related impacts to DIA intelligence production and operations.

b. Serves as a clinical lead advisor to the Surgeon General, Mission Services Directorate. Assists and enables Executive Leadership to make critical employee safety and force health protection decisions that balance clinical risk against operational intelligence requirements. Critical to the analysis and development of strategic planning and direction impacting the agency's combat support capabilities.

c. Serves as lead physician for conducting clinical assessments and medical response to Anomalous Health Incidents (AHI) affecting intelligence operations in CONUS and OCONUS. Responsible for all operational functions of the AHI Program (e.g., policy implementation, ops tempo, procedures, workforce response, workflows, analytical deliverables). Assists Surgeon General in medical evacuation of intelligence assets from sensitive missions in austere locations. Leverages MEDINT to ensure force health protection and medical readiness of intelligence assets to operate worldwide.

d. Represents the Surgeon General's Office at Defense Health Agency (DHA), DoD, ODNI, and other Intelligence Community meetings relating to the AHI program and other medical readiness forums impacting intelligence operations, as required.

e. Perform and oversees physical examinations as pertinent to the medical clearance of adult population. Make independent decisions regarding overseas medical clearances.

1. Obtain pertinent medical and psycho-social history, past medical history, social history and review of body systems. Collect and record medical history and conduct general and specific physical examinations as it pertains to an adult population and relates to medical clearances.
  2. Order laboratory and ancillary tests as appropriate for the medical clearance process.
  3. Differentiate between normal and abnormal (including variations of normal) information obtained from history, physical exam, and ancillary testing.
  4. Preliminary interpretation of diagnostic tests with consultation as necessary (such as lab studies, EKG, etc.)
  5. Develop determination of medical clearance from data obtained from history, physical, laboratory and x-ray studies.
  6. Use all available information to make determination of medical clearance.
  7. Prescribe anti-malarial medications as indicated for foreign travel location.
  8. Recommend appropriate vaccines based off of past immunization records and travel location.
  9. Initiate appropriate management for emergency situations until physician is available.
- f. Must fully abide and adhere to all required trainings, policies, regulations, and standard operating procedures (SOP's).
- g. Contractors will be required to sign a statement (Condition of Employment) consenting to seasonal influenza vaccinations or must provide a recognized exemption. Immunization screening is required. Hepatitis B immunization is required for all positions with direct patient contact. Applicants may be required to show proof of other immunizations depending on the type of position. Must be able to obtain and maintain current Basic Life Support (BLS) certification through American Red Cross. Advanced certification (e.g., ALS) does not supersede BLS. Applicants must be able to fulfill credentialing requirements and obtain and maintain appropriate/relevant clinical privileges.
- h. Additional duties may be assigned by the Surgeon General, appropriate Chief of Service or Chief of Staff, which may include provisions for special training to assure proficiency.

Experience: Degree: Doctor of Medicine, Doctor of Osteopathic Medicine, or equivalent from a school in the United States. This degree must have been accredited by the Council on Medical Education of the American Medical Association; Association of American Medical Colleges; Liaison Committee on Medical Education; Commission on Osteopathic College Accreditation of the American Osteopathic Association, or an accrediting body recognized by the U.S. Department of Education at the time the degree was obtained. Licensure: Applicants must possess a current, active, full, and unrestricted license or registration as a Physician from a State, the District of Columbia, the Commonwealth of Puerto Rico, or a territory of the United States. The contractor should have at least five years of experience as a practicing physician.

5. Deliverables:

**Two Certified Industrial Hygienists**

<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Indoor air quality reports		7 days after each inspect
6.2		Annually Test IH equipment		annual
6.3		Follow up inspection		Six Months
6.4		Annual General Industry report		Formal
6.5		Weekly work activity report		weekly
6.6		Spot inspection report		monthly
6.7		Hazard reports		Within 5 days
6.8		Employee accident reports		Within 5 days

**Two Credentialed Physician Assistants**

<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Conduct clinical assessments and medical response to Anomalous Health Incidents (AHI) affecting intelligence operations in CONUS and OCONUS.		Daily
6.2		Advise and assist the Surgeon General, Mission Services Directorate to make critical employee safety and force health protection decisions that balance clinical risk against operational intelligence requirements critical to the analysis and development of strategic planning and direction impacting the agency's combat support capabilities.		Daily
6.3		Responsible for all operational functions of the AHI Program (e.g., policy implementation, ops tempo, procedures, workforce response, workflows, analytical deliverables).		Daily
6.4		Represents the Surgeon General's Office at Defense Health Agency (DHA), DoD, ODNI, and other Intelligence Community meetings relating to the AHI program and		Monthly

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		other medical readiness forums impacting intelligence operations		
6.5		Perform a physical examination as pertinent to medical clearances of adult population.		Daily
6.6		Supports intelligence community missions through the collection of Medical Intelligence (MEDINT) used to inform DIA leadership on health-related impacts to DIA intelligence production and operations.		Daily
6.7		Review medical records, labs, test results, and make appropriate recommendations and actions.		Daily
6.8		Perform other clinical duties as needed.		Daily

**Two Credentialed Registered Nurses**

<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Assist the PA in reviewing medical intelligence data and preparing force health protection recommendations for the Surgeon General to inform decisions impacting intelligence operations.		Daily
6.2		Assist in the analysis and development of strategic planning and direction impacting the agency's combat support capabilities.		Daily
6.3		Supports clinicians for conducting clinical baselining and medical response to Anomalous Health Incidents (AHI) affecting intelligence operations in CONUS and OCONUS.		Daily
6.4		Key enabler to the operational functions of the AHI Program (e.g., policy implementation, ops tempo, procedures, workforce response, workflows, analytical deliverables).		Daily

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6.5		Assists Surgeon General in medical evacuation of intelligence assets from sensitive missions in austere locations. Leverages MEDINT to ensure force health protection and medical readiness of intelligence assets to operate worldwide.		Daily
6.6		Represents the Surgeon General's Office at Defense Health Agency (DHA), DoD, ODNI, and other Intelligence Community meetings relating to the AHI program and other medical readiness forums impacting intelligence operations, as required.		Monthly
6.7		Coordinates medical services as related to travel health requirements such as physical examinations and administrative medical screening. Performs vital signs, draws specimens for pertinent travel medicine lab work and coordinates with all appropriate parties. Screens and reviews immunization records to select required immunizations. Documents, enters, and retrieves written and electronic medical and laboratory patient data ensuring information is comprehensive, detailed, accurate, and compliant to applicable guidelines.		Daily
6.8		Assists Provider with various examinations and performs other clinical duties as assigned.		Daily

**Two Medical Technicians**

<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Review medical intelligence data and prepare force health protection recommendations		Daily
6.2		Manage patient results status by verifying and certifying results.		Daily



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6.3		Set up and calibrate various analyzers and run quality control samples on all instruments.		Daily
6.4		Perform automated complete blood counts.		Daily
6.5		Perform a variety of microscopic, macroscopic and chemical analyses in Urinalysis.		Daily

**Two Lead AHI Case Managers**

Deliverable		Description	Quantity/Media	Due Date
6.1		Establish & maintain relationships with Intrepid Spirit Centers, National Intrepid Center of Excellence (NICoE), Cross-Functional Team, and DIA Logistics Operation Center (DLOC).		Daily
6.2		Train new case managers		As Needed
6.3		Improve quality control process of AHI Cases through improving the Case Tracker.		Daily
6.4		Prepare briefings/presentations		Weekly
6.5		Improve the AHI Ops SOP		Weekly
6.6		Conduct Medical Interviews.		Daily
6.7		Develop easily digestible case metrics (statistics)		Daily
6.8		Coordinate with medical facilities for case management		Daily

**Ten AHI Case Managers**

Deliverable		Description	Quantity/Media	Due Date
6.1		Preparing Director's update brief		Weekly
6.2		AHI Overview briefs		Daily
6.3		Medical Review Boards		Weekly
6.4		Prepare briefings/presentations		Weekly
6.5		Provide guidance and recommendations to supervisors regarding AHI case management.		Weekly
6.6		Conduct Medical Interviews.		Daily
6.7		Conduct follow up interviews with Affected Individuals to ensure parties are receiving		Weekly

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		proper care. Conduct post-treatment surveys.		
6.8		Prepare relevant reports and respond to RFIs in a timely manner.		Daily

**Two Epidemiologists**

<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Design, plan and initiate epidemiologic studies, surveys, and investigations		Daily
6.2		Provide epidemiological advice and/or assistance in the resolution of technical problems and/or issues that include significant barriers to program or project delivery		Daily
6.3		Define specific injury problems to be studied, conducts background research, and reviews background data. Monitor and document injuries, diseases, and other related health trends, rates, and impacts, reporting findings as required. Evaluate injury and disease preventive interventions determining efficacies. Recommend injury and disease prevention and other health preventive measures.		Daily
6.4		Identify and analyze public health issues and their impact on public policies or scientific studies or surveys.		Daily
6.5		Assist with strategic planning to mitigate injuries and other health factors affecting injury risk. Prepare and/or present summaries for a variety of purposes, monitor internal review board clearances, design questionnaires and other data collection instruments.		Daily

**Two Credentialed Psychologists**

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<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Evaluation and interview report	Provide an unlimited number of written reports of findings based on evaluations and interviews with DIA workforce. Reports shall be provided within 3 business days for standard exams and up to 45 days if additional request have been requested.	Daily
6.2		Monthly progress report to COR	The contractor shall provide written progress reports monthly to the COR by the 15th of every month following the first full month of contractual support. The report shall include, at minimum, a description of activity accomplished during the previous month, actions to be accomplished during the coming weeks, issues to be resolved, risk assessment, a monthly and cumulative burn rate that totals labor hours, and dollars expended by labor category.	Monthly
6.3		Psychological treatment and counselling	Provide clinical notes based on counseling session, documenting any potential issues, treatment, and follow-up plan within 3 business days.	Daily

**Two Credentialed Physicians**

<b>Deliverable</b>		<b>Description</b>	<b>Quantity/Media</b>	<b>Due Date</b>
6.1		Lead clinical assessments and medical response to Anomalous Health Incidents (AHI) affecting intelligence operations in CONUS and OCONUS.		Daily
6.2		Advise and assist the Surgeon General, Mission Services Directorate to make critical employee safety and force health protection decisions that balance clinical risk against operational intelligence requirements critical to the analysis and development of strategic planning and direction		Daily

		impacting the agency's combat support capabilities.		
6.3		Responsible for all operational functions of the AHI Program (e.g., policy implementation, ops tempo, procedures, workforce response, workflows, analytical deliverables).		Daily
6.4		Represents the Surgeon General's Office at Defense Health Agency (DHA), DoD, ODNI, and other Intelligence Community meetings relating to the AHI program and other medical readiness forums impacting intelligence operations		Monthly
6.5		Leads others and performs a physical examination as pertinent to medical clearances of adult population.		Daily
6.6		Leads intelligence community missions through the collection of Medical Intelligence (MEDINT) used to inform DIA leadership on health-related impacts to DIA intelligence production and operations.		Daily
6.7		Perform and oversees physical examinations as pertinent to the medical clearance of adult population. Make independent decisions regarding oversees medical clearances. Review medical records, labs, test results, and make appropriate recommendations and actions.		Daily
6.8		Leads and performs other clinical duties as needed.		Daily

7. Reporting Requirements:

The contractor shall provide written progress reports weekly for the duration of the contract. The original and one copy are required. The progress report shall cover all work completed during the specified period and shall present the work to be accomplished during the subsequent period. This report shall also identify any problems that arose and a statement explaining how the problem was resolved. This report shall also identify any problems that have arisen but have not been completely resolved and provide an explanation.

All information and data related to this contract that the contractor gathers or obtains shall be both protected from unauthorized release and considered the property of the government. The contracting officer will be the sole authorized official to release verbally or in writing, any data, the draft deliverables, the final deliverables, or any other written or printed materials pertaining to this contract. Press releases, marketing material, or any other printed or electronic documentation related to this contract including the association of the vendor with this contract, must not be publicized without the written approval of the contracting officer.

8. Government Furnished Property, Material, Equipment, or Information (GFP, GFM, GFE, or GFI)

The Government will provide contractor employees with the following property at their assigned work locations:

Access to Non-Secure Internet Protocol Network (NIPRNet), Secure Internet Protocol Network (SIPRNet), and the Joint Worldwide Intelligence Communications System (JWICS) networks and systems access, including printers and digital senders.

Contractor employee use of DoD Computers is FOR OFFICIAL USE ONLY and its use is subject to monitoring at any time. All data generated or collected on DIA computers becomes the property of the U.S. Government and its release, downloading or transmittal is subject to Government approval. Contractor personnel are not authorized to introduce computer hardware, software or data storage media; physically or electronically; into a Government facility, computer, or network device without the prior written approval and notification of the appropriate Government authorities. Downloading and transmitting of information within DIA 's custody is prohibited except as provided for in the terms of this contract.

9. Travel:

CONUS and OCONUS travel may be required in the performance of this contract. All travel shall be approved in writing by the COR prior to making any reservations. Contractors shall consult the Defense Travel Management Office website ([www.defensetravel.dod.mil](http://www.defensetravel.dod.mil)) prior to traveling to obtain updated per diem rates for the locality to which they are traveling.



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9.1. Travel costs will be allowed to the extent that they are reasonable and allocable and determined to be allowable under Federal Acquisition Regulation (FAR) 31.205-46. Travel by air will be reimbursed at the actual cost incurred and will not exceed the lowest customary standard coach, or equivalent fare offered during normal business hours.

As prescribed in FAR 31.205-46(a), travel costs for lodging, meals, and incidental expenses are limited to the maximum per diem rates in effect at the time of travel set forth in the Federal Travel Regulation (FTR); the Joint Travel Regulations, Volume 2, DoD Civilian Personnel, Appendix A; or the Standardized Regulations (Government Civilians, Foreign Areas), Section 925, "Maximum Travel Per Diem Allowances for Foreign Areas." IAW FAR 52.216-7, the contractor may submit to the COR, in such form and reasonable detail as the representative may require, an invoice or voucher supported by a statement of the claimed allowable cost for performing this contract.

The per diem allowance will not be allowed when the period of official travel is ten (10) hours or less during the same calendar day. Travel by privately owned vehicle will be reimbursed at the current GSA approved mileage rate. Current travel policy and per diem rates may be obtained at the following Internet site:

<http://www.defensetravel.dod.mil/site/perdiem.cfm>

9.2. Travel Reimbursement: Only those travel costs incurred by the contractor for contracted personnel assigned and working under this SOW for the following expenses: 1) Contractor employee airline tickets, per diem, and miscellaneous incidental expenses. Such transportation costs incurred will be reimbursed at actual costs in accordance with the JTR. Per Diem is not authorized within the designated AOR unless prior written approval is granted by the COR. Per Diem is authorized during pre-deployment training. Only per diem and travel costs shall be reimbursed; incidentals and miscellaneous expenses will not be reimbursed. Regardless of amount, all travel costs shall be documented via copies of the original travel receipts, to be provided with the invoice requesting payment, providing the following information: Traveler's name, date and place (city, town, or other similar designation) of the expenses, purpose of the trip, and expense incurred.

9.3. Local travel, within 50 miles of duty location, will not be reimbursed.

1.1. 9.4. The two principal places of performance are the Defense Intelligence Analysis Center, Bolling AFB, Washington, DC and OCONUS sites based on mission needs. Accordingly, reimbursable travel and per diem for the contractor's employees performing work on a regular basis at the principal place of performance is not authorized.

10. Place of Performance:

The AHI Support Staff and Occupational Health Staff may provide services to facilities outside of the primary work location throughout the National Capitol Region (NCR). The NCR is defined as falling within the area contained by the legal borders of: The District of Columbia; Arlington, Fairfax, Loudon, Prince William, and Stafford counties in Virginia (including incorporated cities). Contractors will also be assigned to various OCONUS facilities based on mission need.

11. Duty Hours:

Duty schedule and core work hours:

Duty Hours: The core work hours of operations for all personnel assigned to either CONUS or OCONUS sites are Monday through Friday (0700 – 1630) hours. A 40-hour workweek is anticipated for the contractor personnel; however, the week may be extended to meet operational needs with prior, written, COR approval. The Program Manager shall obtain COR approval, in writing, prior to any performance in excess of 40 hours per week to ensure availability of funding. The contractor employees' 40-hour work week may include shift work to accommodate the Government's needs on first, second and third shifts. Hours and shifts are subject to change due to the need to meet mission requirements. Compressed work schedules may occasionally be required. If invoked, compressed work schedules will be communicated from the Contracting Officer or their representative. Performance may follow a Monday through Thursday or Monday through Friday work pattern with start/end times ranging anywhere within a 24-hour period (ex. 0400-1230, 1330-2200). The Government reserves the right to adjust the work schedules as mission dictates by providing a 24 hour advanced notice.

11.1 Overtime:

Overtime will be handled on a case-by-case basis and will be charged to the XXX CLIN. Overtime requires pre-approval from the Government, unless for an unplanned emergency. In the occurrence of an unplanned emergency, the Contracting Officer shall be informed at the beginning of the next business day.

11.2 Surge Requirements:

The possibility for surge support exists depending on the Governments' requirement and the availability of funding. Surge support shall be priced out and included in the proposal but should not be executed without written approval of the government. Surge options may be exercised for all or designated specific skill sets for all or a portion of the surge period as designated by the Government.

Execution of this Performance Work Statement may necessitate surges in workload requirements. Performance of the workload may require off shift working hours, evenings, weekends and holiday working hours. All surge/emergency work done outside the

predetermined standard work week will be considered over & above and will be paid at the over and above rates established in the Task Order.

12. Contractor Personnel Requirements – Key Personnel:

Physician Assistants, Registered Nurses, Medical Technicians, AHI Lead Case Managers, AHI Case Managers, Psychologists, Epidemiologists, Physicians and Certified Industrial Hygienists. The personnel specified as key personnel are considered essential to the work performed under this task order. The Contractor shall not substitute key personnel without written permission of the Contracting Officer. Before substituting or replacing the specified individuals, the Contractor shall notify the Contracting Officer no less than 60 calendar days in advance and shall submit justification (including the names and resumes of the proposed substitutions) in sufficient detail to permit evaluation of the impact on the program. The proposed substitutions shall possess qualifications equal or superior to those of the key person(s) being replaced. The Contractor shall make no diversions or substitutions without the written consent of the Contracting Officer.

13. Security Requirements:

Top Secret/SCI Security Clearance: The assigned PSIs are required to obtain at a minimum a level 6 Top Secret clearance with access to secure compartmented information (SCI). Contractor employees must be read on to Special Intelligence (SI) and Talent Keyhole (TK) caveats before contract work can begin.

14. Information Security:

All persons performing work under this contract shall protect and safeguard information in accordance with DoD (as applicable) and DIA directives, instructions, and procedures. These same persons shall immediately report any deviation or violation of this guidance, or any unusual or suspicious activity to the DIA Security Office. These same persons will provide assistance and full cooperation in any subsequent investigations or inquiries conducted by DIA or other governmental agencies.

15. Annual Training:

Contractors are required to take all DIA mandatory training. All contractor employees are required to maintain their certifications and professional training at their own expense. Any medical training and liability insurance must be covered by the contractor and/or associated vendor. Due to the specialized medical roles that are needed, contractors will also be required to strictly adhere to any Standard Operating Procedures (SOP's), regulations, and medical/privacy trainings.

16. Non-Disclosure Requirements (NDA):

All contractor personnel shall sign, prior to beginning performance, a non-disclosure agreement in accordance with DFARS 227.7103-7 and/or a DSS Non-Disclosure agreement. This Contract is bound by all NDAs signed by its employees. In the event a contractor employee violates any of the terms of the NDA, the Contractor will be considered in breach of contract. This could result in a termination for default.

17. Invoicing Procedures:

In order to submit your invoice electronically on the MPO website, you are required to have a PKI (Private Key Infrastructure) certificate. This acts as your digital ID when you try to log into the MPO invoicing system. There are two companies that offer the certificate. They are:

ORC ( <http://www.eca.orc.com/> ) and IdenTrust  
(<http://www.identrust.com/certificates/eca/index.html>)

The certificates range in cost from \$100.00-\$300.00, and they are good from one to three years. When you go to any one of the two sites, ensure that you are choosing the correct certificate. You want the ECA / Identity certificate on ORC and on the IdenTrust website look for the "Medium Assurance" certificate.

Once you choose the company you want to go with fill out their application and mail it in, it takes about a week to 1-1/2 weeks to get the certificate. They send the certificate to you via e-mail. They also send you instructions on how to download the certificate to your computer. Once you've downloaded the certificate and loaded it onto your web browser, please inform the Electronic Commerce Team (EC Office) at 410-854-5445 to request an account. The EC Office will download your public key and account for you to log in. Should your contract require ONR or DCAA approval, you will need to have the MPO help desk add these options to your profile. You will receive a welcome email entitled "Welcome to the MPO Website" that includes the user id, password, and instructions on getting started.

After you sign up and start submitting invoices electronically, please ensure all information on the invoice is accurate. To avoid a delay or rejection of an invoice a thorough review is recommended. If required, the ONR or DCAA option will need to be selected which will automatically route the invoice to ONR or DCAA for processing. After ONR or DCAA has approved, the invoice will be automatically be sent back to MPO for processing.

Benefits of Electronic Invoicing include saving time and money, and emailed invoice status notifications.